



High Point Christian Academy  
High School Waiver Application

**This form is to be completed if a student has not met the prerequisite requirements and did not receive a teacher recommendation for the class requested.**

Student Name: \_\_\_\_\_ School Year: \_\_\_\_\_

Honors/AP Course Requested: \_\_\_\_\_

Current Class: \_\_\_\_\_ End of Year Grade: \_\_\_\_\_

Recommended Course: \_\_\_\_\_

- Reason: \_\_\_\_\_ Grade requirement not met. (Required grade: \_\_\_\_\_)  
\_\_\_\_\_ No Teacher recommendation  
\_\_\_\_\_ No AP Potential (AP courses only)

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I understand the school's recommended class should best fit my academic needs. After carefully considering this recommendation, I would like to be given the opportunity to enroll in the honors/AP program because I believe I am capable of succeeding at this level and it will help me accomplish my personal and academic goals.

If placed in this program, I understand I am making a commitment to put forth the time and effort required to be successful in meeting the rigorous course expectations. I understand that the more rigorous nature of this course may mean I need to seek outside tutoring to improve my chances for success.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I support my student in making this request. We have thoughtfully considered and discussed his/her test scores, classroom performance, work habits, motivation, individual learning style, and academic needs as they pertain to his/her potential for success in the honors/AP program.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I met with the above student and parent(s) to discuss the expectations of the honors/AP program and the student's ability and motivation to meet those expectations. My signature signifies that I have discussed the student's potential success in the honors/AP course based on classroom performance and test scores, but it does not necessarily indicate agreement with the decision to submit a waiver.

Administration Signature: \_\_\_\_\_ Date: \_\_\_\_\_